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Written on MARCH 27, 2014 AT 8:47 AM by VKREMER

Tobacco Use – Our People, Our Policies, Our Personal Responsibilities

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There is no debate on the hazards of smoking and tobacco use.

From a scientific perspective, the debate ended conclusively over 50 years ago when the U.S. Surgeon General issued the landmark report that changed how the country faced this growing public health threat.

Smoking kills.

And 50 years later, it is still killing.

Smoking is the leading cause of preventable death. And one-half of all smokers will die from a smoking related complication. On average, smokers shorten their lifespan by ten years.

These are sobering statistics, but what’s even more sobering is the fact that our message is going unheeded by too many of our people in uniform. The rate of military members who smoke is 3.9 percent higher than the civilian population, and smokeless tobacco use is 10.5 percent higher.

And the message is not just that tobacco use kills you in the long run. It is a threat to readiness – your lungs don’t work as well, physical stamina is diminished, health problems are exacerbated, acute medical conditions are more likely, and – sadly – for wounded warriors, their risk of surgical complication goes up, and the speed of wound healing goes down.

As of March, 2013 all non-Medicare [TRICARE](#) eligible beneficiaries are able to receive traditional Nicotine Replacement Therapy products, tobacco cessation prescription medications, at no cost when prescribed by their doctor. There is a [24/7 toll-free helpline](#) to assist people with quitting tobacco and access to quit support counseling. Also included in the benefit are web-based resources provided through the Quit Tobacco – Make Everyone Proud campaign at [UCanQuit2.org](#).


Over the last several months, we have been engaged in a dialogue with the senior military and civilian leaders in the Department regarding even more productive steps we can take as an institution to dissuade our young service members and families from using tobacco, or persuade them to stop earlier in their lives.


We look forward to sharing with all of you the results of these efforts in the very near


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future.

But, in the meantime, we are reminded daily of the courage taken by institutions elsewhere in the country to confront this relentless public health threat. A major retail chain – CVS – announced that they will no longer sell tobacco products. The U.S. Public Health Service has now prohibited any member of the PHS from using tobacco while wearing the uniform. College campuses are banning tobacco use anywhere on their premises.

We’re also doing our part — the Defense Health Headquarters in Falls Church, Va. has been a tobacco free campus for the past year.

As health professionals, we have responsibilities as leaders and role models to set expectations for those who work under our authority and command. To put it more simply, as a leader in military health you should not be using tobacco.

In private discussions and in public forums, we should encourage all military medical leaders to push their local installations and units to take steps that can help dissuade or reduce tobacco use wherever you work and live.

There are larger institutional steps that we will be taking within the Department of Defense on this issue. But, we can begin to prepare now by communicating our views on the harm from tobacco in every public outlet at our disposal.

In clear and unambiguous terms, our voices — your voices — need to be heard.

Sincerely,
Jonathan Woodson, Assistant Secretary of Defense for Health Affairs
Lt. Gen. Patricia Horoho, Surgeon General, United States Army
Vice Adm. Matthew Nathan, Surgeon General, United States Navy
Lt. Gen. Thomas Travis, Surgeon General, United States Air Force

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